

**HOLLAND & KNIGHT LLP**

One Atlantic Center  
1201 West Peachtree Street, N.E.  
Suite 2000  
Atlanta, Georgia 30309-3400

404-817-8500  
404-881-0470 Fax  
www.hklaw.com

RECEIVED  
CENTRAL FAX CENTER

MAR 04 2004

**OFFICIAL****FACSIMILE**

Annapolis	San Francisco
Atlanta	Seattle
Bethesda	Tallahassee
Boston	Tampa
Bradenton	Washington, D.C.
Chicago*	West Palm Beach
Fort Lauderdale	
Jacksonville	International Offices:
Lakeland	Caracas*
Los Angeles	Helsinki
Miami	Mexico City
New York	Rio de Janeiro
Northern Virginia	São Paulo
Orlando	Tel Aviv**
Portland	Tokyo
Providence	
St. Petersburg	*Holland & Knight LLC
San Antonio	**Representative Office

**TO:**

Commissioner for Patents	U.S. Patent and Trademark Office	703-872-9306
NAME	COMPANY/FIRM	FAX NUMBER
Alexandria	VA	703-308-1234
CITY	STATE	(TELEPHONE NUMBER)

**FROM:**

Rivka D. Monheit	404-817-8514	5
NAME	TELEPHONE	TOTAL PAGES (Including Cover Sheet)

**FOR THE RECORD:**

DATE: March 4, 2004	URGENCY: <input type="checkbox"/> SUPER RUSH	<input checked="" type="checkbox"/> RUSH	<input type="checkbox"/> REGULAR
FAXED BY: Pam Turnbough	FILE #: 077586/00009	CLIENT NAME: ACU 109 DIV (2)	

CONFIRMED: <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME:	TIME:
If you did not receive all of the pages or find that they are illegible, please call (404) 817-8500		
<b>CONFIDENTIALITY NOTICE:</b> This facsimile, along with any documents, files, or attachments, may contain information that is confidential, privileged, or otherwise exempt from disclosure. If you are not the intended recipient or a person responsible for delivering it to the intended recipient, you are hereby notified that any disclosure, copying, printing, distribution or use of any information contained in or attached to this facsimile is strictly prohibited. If you have received this facsimile in error, please immediately notify us by facsimile or by telephone collect at the numbers stated above, and destroy the original facsimile and its attachments without reading, printing, or saving in any manner. Your cooperation is appreciated. Thank you.		

**MESSAGE:****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Julie Straub, Howard Bernstein, Donald E. Checkering, III, Sarwat Khattak, and Greg Randall

Serial No.: 09/706,045 Art Unit: 1617

Filed: November 3, 2000 Examiner: E. Webman

For: **POROUS DRUG MATRICES AND METHODS OF MANUFACTURE THEREOF**

# 1718238\_v1

PTO/SB/21 (08-03)

Approved for use through 07/31/2008. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number 09/706,045
		Filing Date November 3, 2000
		First Named Inventor Julie Straub
		Art Unit 1617
		Examiner Name E. Webman
Total Number of Pages In This Submission 4		Attorney Docket Number ACU 109 DIV (2)

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Rivka D. Monheit, Esq., Reg. No. 48,731	Holland & Knight LLP Suite 2000, One Atlantic Center; 1201 West Peachtree Street, N.E.; Atlanta, GA 30309-3400
Signature	<i>Rivka D. Monheit</i>	
Date	March 4, 2004	

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Pam Turnbough	
Signature	<i>Pam Turnbough</i>	Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

077586/00009

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 320.00)

## Complete if Known

Application Number	09/706,045
Filing Date	November 3, 2000
First Named Inventor	Julie Straub
Examiner Name	E. Webman
Art Unit	1617
Attorney Docket No.	ACU 109 DIV (2)

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit Account Number 50-1868

Deposit Account Name Holland &amp; Knight LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments

Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee			
1002 340	2002 170	Design filing fee			
1003 530	2003 265	Plant filing fee			
1004 770	2004 385	Reissue filing fee			
1005 160	2005 80	Provisional filing fee			
SUBTOTAL (1) (\$ .00)					

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	17	-20* =	0	X	=	Fee Paid
Independent Claims	2	-3** =	0	X	=	
Multiple Dependent						

Large Entity	Small Entity	Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$ .00)			

\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath		
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet		
1053 130	1053 130	Non-English specification		
1812 2,520	1812 2,520	For filing a request for ex parte reexamination		
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action		
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action		
1251 110	2251 55	Extension for reply within first month		
1252 420	2252 210	Extension for reply within second month	155.00*	
1253 950	2253 475	Extension for reply within third month		
1254 1,480	2254 740	Extension for reply within fourth month		
1255 2,010	2255 1,005	Extension for reply within fifth month		
1401 330	2401 165	Notice of Appeal	165.00	
1402 330	2402 165	Filing a brief in support of an appeal		
1403 290	2403 145	Request for oral hearing		
1451 1,510	1451 1,510	Petition to Institute a public use proceeding		
1452 110	2452 65	Petition to revive - unavoidable		
1453 1,330	2463 665	Petition to revive - unintentional		
1501 1,330	2501 665	Utility issue fee (or reissue)		
1502 480	2502 240	Design issue fee		
1503 640	2503 320	Plant issue fee		
1480 130	1480 130	Petitions to the Commissioner		
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)		
1808 180	1808 180	Submission of Information Disclosure Stmt		
8021 40	8021 40	Recording each patent assignment per property (times number of properties)		
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))		
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))		
1801 770	2801 385	Request for Continued Examination (RCE)		
1802 900	1802 900	Request for expedited examination of a design application		
Other fee (specify) * \$55 paid on 1/22/04				
Reduced by Basic Filing Fee Paid				
SUBTOTAL (3) (\$ 320.00)				

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Rivka D. Monheit	Registration No. (Attorney/Agent)	48,731 Telephone (404) 817-8514
Signature	Rivka D. Monheit	Date	March 4, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) ACU 109 DIV (2)
In re Application of Julie Straub et al.		
Application Number 09/706,045		Filed November 3, 2000
For POROUS DRUG MATRICES AND METHODS OF MANUFACTURE THEREOF		
Art Unit 1617		Examiner E. J. WEBMAN
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):		
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 420.00	
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half and the payment for a one month extension of time, and the resulting fee is: \$155.00.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-1868</u> .		
I have enclosed a duplicate copy of this sheet.		
I am the <input type="checkbox"/> applicant/inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).		
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>48,731</u>		
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.		
<u>March 4, 2004</u>		<u>Rivka D. Monheit</u>
Date		Signature
<u>(404) 817-8514</u>		Rivka D. Monheit, Esq.
Telephone Number		Typed or printed name
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.		
<input type="checkbox"/> Total of _____ forms are submitted.		

077586.00009